

TAMALA HOLLAND
PARALEGAL SPECIALIST
DELEGATED OF FPO
(703) 325-6483

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.	FILING DATE
APPLICANT(S)	

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.			/			
TOTAL DEP.			22			
TOTAL CLAIMS			23			

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TOTAL DEP.			22					
TOTAL CLAIMS			23					